
RESOURCES

RESOURCE COMPUTATIONS

**B. FREQUENCY OF
VERIFICATION
REQUIREMENTS**

At a minimum, resources owned by a client are verified at the time of application and at each regular review scheduled annually. However, circumstances may warrant reverification of resource(s) at shorter intervals. The following describes situations which mandate reverification of resources at shorter intervals than annually but it is not an all-inclusive list. Any reported changes in resources or discovery of changes in resources may warrant verification or reverification.

**1. Resources
Within \$100
of Applicable
Limit**

Individuals/Couples determined eligible for Medicaid who own countable resources valued within \$100 of the applicable limit must have resources renewed/verified every 6 months rather than annually. The purpose of the 6-month (special) review will be to verify the value of countable resources in order to determine if the individual/couple remains eligible based on resources. A tickler must be utilized to control the timing of the required review of cases with countable resources close to the resource limit.

**2. Long Term
Care
Recipients
in Medicare
Beds**

Individuals who are placed in Medicare certified nursing facilities are not required to pay any of their income toward the cost of their care which means that income may be allowed to accumulate and result in excess resources during the first 100 days of possible Medicare coverage. This means that it is necessary to reverify resources during the period of Medicare coverage to check for possible excess resources.

**3. Cases With
VA Income
That Is Not
Countable**

Client cases, especially long term care cases, that receive excess income that is not countable as income must be monitored closely for excess resources. The amount of the monthly income that is not being counted will determine frequency a review/reverification is deemed necessary.